

NAME: BOB PROSPERO
ADDRESS:
1 FIELD BLVD
UGY, CA 12345

MRN#: 237-12-1234
ACCT#: 11223368
DOB: 04/01/1941

SSN# 999-99-9993

RACE: U

SEX: M
RELIGION: AGNO
MARITAL STATUS: D

MANAGING MD: DR. B. ELAPSE
DIAGNOSIS: C185.9
PATIENT PHONE# 555-222-1114

EMPLOYER: UNKNOWN

EMPLOYER ADDRESS: UNKNOWN

INSURANCE PROVIDER: SELF-PAY
GROUP #:

RADIATION SUMMARY

DIAGNOSIS: 185 Prostate (stage T1c N0 M0)

INTENT: Curative primary

DATES OF TREATMENT: 11/16/06 through 1/16/07 (61 elapsed days)

SITE TREATED: Prostate/72.00 Gy/40 fractions

TECHNIQUE: IMRT, five field MLC, step and shoot, VacLok immobilization, 10 MV photons

COMMENTS: This patient is a 65-year-old gentleman Karnofsky status 100 with low risk prostate cancer, diagnosed at time of biopsy 10/10/2006, with Gleason 3+3 adenocarcinoma in 1/6 specimens with PSA 8.4. The patient elected definitive external radiation treatment. He has at this time completed a course of definitive radiation treatment (monotherapy) to prostate only, with the goal of cure. He is tolerating treatments well. He had some mild dysuria which resolved with cranberry juice and only minimal nocturia, about times two primarily secondary to diuretics. He has had no proctitis or diarrhea. Appetite has been good; he has had a 7 pound weight loss (3%) during treatment. At completion his PSA had fallen to 7.8. He continues under the care of his urologist and is to return for follow-up here in six weeks.

MEMORIAL HOSPITAL - PATIENT IDENTIFICATION

Acsn #

ProsperoBobPatient Last NameFirst NameMI Prefix Suffix

Maiden Name/Alias999 - 99 - 993237-12-1234SocSec#MR #

Address1 Field BlvdCounty

City/StUgyCAZip + 412345Area Code/Phone #555 / 222 - 1114

PT PERSONAL INFO

Birthdate04 / 01 / 1941Age65Birth Loc999

Sex1Race99Hispanic Orig9Race#2-5999999Insurance02

Spouse Last Name/First Name

OccupNRIndusNR

Comments

SECONDARY CONTACT

Phone-Relation

Last NameFirst NameMI

Address

CityStZip+4

DIAGNOSIS IDENTIFICATION

Seq #00

SiteProstate GlandSite codeC619

HistologyAdenocarcinomaHist code8140

Behavior3Grade2Coding Sys SiteCCCMorphCCConv flagCC

Laterality0Dx Confirm1Rpt Src2Casef Src23Class/Case2

Supporting Text10/10/06- Prostate Gland-adenocarcinoma, gleason 3+3.

DATE INIT DX

10 / 10 / 2006AdmitD/C

DX EXT OF DIS

CS Tumor Sz (mm)999CS Extension15CS T Eval

LN examLN +CS LN00CS N Eval

CS Ver 1stCS Ver LatestCS Mets00CS M Eval

CS SS Factors

#1C38.4 only#2#3097C619 only#4#5#6

Sum Stage

1VersionCCDerivedCC

PT

NMStageDescripStaged ByAJCC EdCC

CT

NMStageDescripStaged By

Staging DescripTic, N0, M0

Date First Course of TreatmentDate Init Rx

Surgery

DateSurg Prim SiteScope LNOtherReason No Surg

DateSurg Prim SiteScope LNOtherReason No Surg

DateSurg Prim SiteScope LNOtherReason No Surg

OTHER TREATMENT

Date11 / 16 / 2006Radiation Sum41Surg/Rad Seq0Reg Rad Rx Modal31

DateChemotherapy Sum

DateHormone Sum

DateBRM SumOther Rx SumTranspl/Endocr Sum

PHYS SEQ

N=

M=Ref From

R=Add

F=Ref To

2=Add

3=Comments:

PT STATUS

Date Last Contact01 / 16 / 2007Vital Stat1CA StatusFU Source0

COD (ICD)ICD Revision

OVERRIDE FLAGS

Age/Site/MorphCCSeqNo/Dx ConfCCSite/Lat/SeqNoCCSite/TypeCCHistCC

Rept SourceCCIll-def SiteCCLeuk,LymphCCSite/BehCCSite/Lat/MorphCC

Additional Data

Census TractCCCen Cod SysCCCen YearCCCen Tr CertCC

NHIA Hispanic OrigCCIHSLinkCCComp EthnCCComp Ethn SrcCC

Rec TypeCCUnique Pt IDCCReg IDCCNAACCR Rec VerCC

KEY

Data items in **Bold** are required fields Other data items are optional or “advanced surveillance”
CCcomputed field, no manual input Shaded are optional non-NPCR items